

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Friends of Doc Hastings

ADDRESS (number and street)

PO Box 2926

Check if different  
than previously  
reported. (ACC)

Pasco

WA

99302-2926

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C

C00286856

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

WA

04

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the  
State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y

01 / 01 / 2014

through

M M / D D / Y Y Y Y

03 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Margee Clancy

Signature of Treasurer

Margee Clancy

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04 / 15 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 43

Write or Type Committee Name

**Friends of Doc Hastings**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	10206	540373.82
(b) Total Contribution Refunds (from Line 20(d)) .....	10850	29155
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	-644	511218.82
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	43915.33	282926.73
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	894.21
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	43915.33	282032.52
8. Cash on Hand at Close of Reporting Period (from Line 27).....	248874.77	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 43

Write or Type Committee Name

Friends of Doc Hastings

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:**

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

4845

212982

(ii) Unitemized.....

4361

105791.82

(iii) TOTAL of contributions from individuals ▶

9206

318773.82

(b) Political Party Committees.....

0

0

(c) Other Political Committees (such as PACs).....

1000

221600

(d) The Candidate.....

0

0

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

10206

540373.82

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0

0

**13. LOANS:**

(a) Made or Guaranteed by the Candidate.....

0

0

(b) All Other Loans.....

0

0

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0

0

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0

894.21

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

398.88

2088.52

**16. TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

10604.88

543356.55

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 43

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	43915.33	282926.73
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans .....	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	10850	25655
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs) .....	0	3500
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	10850	29155
21. OTHER DISBURSEMENTS .....	114130	320920
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	168895.33	633001.73

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	407165.22
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	10604.88
25. SUBTOTAL (add Line 23 and Line 24).....	417770.1
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	168895.33
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	248874.77

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 43

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Doc Hastings**

Full Name (Last, First, Middle Initial)

**Richard Black**

Mailing Address 510 Banks Avenue

City

Grand Coulee

State

WA

Zip Code

99133-9793

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Grand Coulee School District

Occupation

School Counselor

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

225

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		03		2014

Transaction ID : A-CF40848

Amount of Each Receipt this Period

75

Full Name (Last, First, Middle Initial)

**Frank H. Brock**

Mailing Address 3010 Birch Road

City

Pasco

State

WA

Zip Code

99301-8860

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Franklin County

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

400

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		08		2014

Transaction ID : A-CF40942

Amount of Each Receipt this Period

200

Full Name (Last, First, Middle Initial)

**Annette Christensen**

Mailing Address PO Box 98

City

Grandview

State

WA

Zip Code

98930-0098

FEC ID number of contributing  
federal political committee.

C

Name of Employer

R.E. Powell Distributing

Occupation

Business Manager

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		15		2014

Transaction ID : A-CF40934

Amount of Each Receipt this Period

100

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

375.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 43

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Friends of Doc Hastings**

Full Name (Last, First, Middle Initial)

**William M. Conner**

Mailing Address **846 108th Avenue NE**

City

**Bellevue**

State

**WA**

Zip Code

**98004-4671**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Retired**

Occupation

**Retired**

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**700**

Date of Receipt

**01 / 15 / 2014**

**Transaction ID : A-CF40936**

Amount of Each Receipt this Period

**500**

Full Name (Last, First, Middle Initial)

**Elwin Fisk**

Mailing Address **2348 Snohomish Avenue**

City

**Richland**

State

**WA**

Zip Code

**99354-1989**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Retired**

Occupation

**Retired**

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**300**

Date of Receipt

**01 / 02 / 2014**

**Transaction ID : A-CF40853**

Amount of Each Receipt this Period

**100**

Full Name (Last, First, Middle Initial)

**Dennis L. Forsgren**

Mailing Address **2201 Windsor Road**

City

**Alexandria**

State

**VA**

Zip Code

**22307-1019**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**HBW Resources**

Occupation

**Attorney**

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**500**

Date of Receipt

**01 / 15 / 2014**

**Transaction ID : A-CF40925**

Amount of Each Receipt this Period

**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1100.00**

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 43

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Doc Hastings**

Full Name (Last, First, Middle Initial)

**Clarence Glover**

Mailing Address 103 Pond Lane

City

Sequim

State

WA

Zip Code

98382-8922

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Peter Black Real Estate

Occupation

Real Estate Sales

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

215

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		02		2014

Transaction ID : A-CF40905

Amount of Each Receipt this Period

45

Full Name (Last, First, Middle Initial)

**Edward R. Hawley**Mailing Address 1105D 15th Avenue  
# 448

City

Longview

State

WA

Zip Code

98632-3080

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NA

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

800

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		16		2014

Transaction ID : A-CF40930

Amount of Each Receipt this Period

100

Full Name (Last, First, Middle Initial)

**Edward R. Hawley**Mailing Address 1105D 15th Avenue  
# 448

City

Longview

State

WA

Zip Code

98632-3080

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NA

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

800

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		10		2014

Transaction ID : A-CF40978

Amount of Each Receipt this Period

100

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

245.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:

PAGE 8 OF 43

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Doc Hastings**

Full Name (Last, First, Middle Initial)

**Edward R. Hawley**

Mailing Address 1105D 15th Avenue  
 # 448

City State Zip Code  
 Longview WA 98632-3080

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 NA

Occupation  
 Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

800

Date of Receipt

M M / D D / Y Y Y Y  
 02 28 2014

Transaction ID : A-CF41093

Amount of Each Receipt this Period

100

Full Name (Last, First, Middle Initial)

**Mark Kayser**

Mailing Address 12141 Fairview Road

City State Zip Code  
 Ellensburg WA 98926-6937

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M / D D / Y Y Y Y  
 01 02 2014

Transaction ID : A-CF40909

Amount of Each Receipt this Period

150

Full Name (Last, First, Middle Initial)

**Rick E. Marks**

Mailing Address 11988 Sentinel Point Court

City State Zip Code  
 Reston VA 20191-4806

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Roberts, Monagle &amp; Eastaugh

Occupation

Principle

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M / D D / Y Y Y Y  
 01 09 2014

Transaction ID : A-CF40917

Amount of Each Receipt this Period

500

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

750.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 43

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Doc Hastings**

Full Name (Last, First, Middle Initial)

**Nick Mendoza**

Mailing Address 1725 River Road  
 Apt. 313

City	State	Zip Code
Yakima	WA	98902-1281

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation  
Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

370

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		07		2014

Transaction ID : A-CF40866

Amount of Each Receipt this Period

50

Full Name (Last, First, Middle Initial)

**John Miller**

Mailing Address 15289 NW Aberdeen Drive

City	State	Zip Code
Portland	OR	97229-0911

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Macpherson Energy

Occupation  
Executive

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		09		2014

Transaction ID : A-CF40972

Amount of Each Receipt this Period

250

Full Name (Last, First, Middle Initial)

**Susan C. Olson**

Mailing Address 93 Camfield Road

City	State	Zip Code
Yakima	WA	98908-9684

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Olson's Honey

Occupation  
Bookkeeper

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		02		2014

Transaction ID : A-CF40882

Amount of Each Receipt this Period

500

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

800.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 43

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Doc Hastings**

A. Full Name (Last, First, Middle Initial)  
**Jack W. Oppelt**

Mailing Address 932 N Owen Avenue

City	State	Zip Code
Pasco	WA	99301-4383

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 N/A

Occupation  
 Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2014

Transaction ID : A-CF41092

Amount of Each Receipt this Period

500

B. Full Name (Last, First, Middle Initial)  
**Leonard F. Perkins Jr.**

Mailing Address 1065 Allenwhite Drive

City	State	Zip Code
Richland	WA	99352-8686

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 N/A

Occupation  
 Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

650

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		07		2014

Transaction ID : A-CF40873

Amount of Each Receipt this Period

250

C. Full Name (Last, First, Middle Initial)  
**Thomas A. Podominick**

Mailing Address PO Box 261

City	State	Zip Code
Metline Falls	WA	99153-0261

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Retired

Occupation  
 Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

375

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		24		2014

Transaction ID : A-CF40949

Amount of Each Receipt this Period

125

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

875.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 43

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Doc Hastings**

Full Name (Last, First, Middle Initial)

**Lionel Smith**

Mailing Address 4810 NE 259th Street

City

Ridgefield

State

WA

Zip Code

98642-9747

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		03		2014

Transaction ID : A-CF40842

Amount of Each Receipt this Period

100

Full Name (Last, First, Middle Initial)

**Terry R. Thorn**

Mailing Address 11920 158th Avenue NE

City

Redmond

State

WA

Zip Code

98052-2633

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Vision Marketing

Occupation

Food Broker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		30		2014

Transaction ID : A-CF40955

Amount of Each Receipt this Period

150

Full Name (Last, First, Middle Initial)

**Richard Weaver**

Mailing Address PO Box 2937

City

Chelan

State

WA

Zip Code

98816-2937

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WeavTel

Occupation

General Manager

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

285

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		21		2014

Transaction ID : A-CF40944

Amount of Each Receipt this Period

250

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 43

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Doc Hastings**

Full Name (Last, First, Middle Initial)

**George Weyerhaeuser**

Mailing Address 11801 Gravelly Lake Drive SW

City

Tacoma

State

WA

Zip Code

98499-1410

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Weyerhaeuser CompanyOccupation  
Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		17		2014

Transaction ID : A-CF40928

Amount of Each Receipt this Period

200

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

200.00

4845.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 OF 43

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Friends of Doc Hastings**

Full Name (Last, First, Middle Initial)

**BuildPAC Of The National Association Of Home Builders (buildpac)**

Mailing Address 1201 15th Street NW

City

Washington

State

DC

Zip Code

20005-2842

FEC ID number of contributing  
federal political committee.

**C** C00000901

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000

Date of Receipt

M M / D D / Y Y Y Y Y  
01 30 2014

Transaction ID : A-CF40964

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00

1000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 43

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input checked="" type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Doc Hastings**

Full Name (Last, First, Middle Initial)

**Yakima Federal Savings and Loan - Kennewick**

Mailing Address 3350 W Clearwater Avenue

City

Kennewick

State

WA

Zip Code

99336-2733

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1915.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		16		2014

Transaction ID : A-MF41096

Amount of Each Receipt this Period

121.95

Interest income

Full Name (Last, First, Middle Initial)

**Yakima Federal Savings and Loan - Kennewick**

Mailing Address 3350 W Clearwater Avenue

City

Kennewick

State

WA

Zip Code

99336-2733

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1915.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		20		2014

Transaction ID : A-MF41097

Amount of Each Receipt this Period

155.08

Full Name (Last, First, Middle Initial)

**Yakima Federal Savings and Loan - Kennewick**

Mailing Address 3350 W Clearwater Avenue

City

Kennewick

State

WA

Zip Code

99336-2733

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1915.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		20		2014

Transaction ID : A-MF41098

Amount of Each Receipt this Period

121.85

Interest Income

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

398.88

398.88

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 43

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Doc Hastings**

Full Name (Last, First, Middle Initial)

**A. Anitra Beruti Consulting, Llc**Mailing Address 524 6th Avenue W  
Apt. 106City State Zip Code  
Seattle WA 98119-5901Purpose of Disbursement  
Consulting Service - Fundraising

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		01		2014

Amount of Each Disbursement this Period

4420.92
---------

**Transaction ID : B-E-41042**

Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial)

**B. Washington Athletic Club - Seattle**

Mailing Address 1325 6th Avenue

City State Zip Code  
Seattle WA 98101-2304Purpose of Disbursement  
Deposit, Event

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2013

Amount of Each Disbursement this Period

766.5
-------

**Transaction ID : B-S-9****[MEMO ITEM]**

Subitemization of Anitra Beruti Consulting, Llc(01/01/14)

Full Name (Last, First, Middle Initial)

**c. The Rainier Club - Seattle**

Mailing Address 820 4th Avenue

City State Zip Code  
Seattle WA 98104-1653Purpose of Disbursement  
Fundraising Food & Bev.

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		19		2013

Amount of Each Disbursement this Period

500
-----

**Transaction ID : B-S-10****[MEMO ITEM]**

Subitemization of Anitra Beruti Consulting, Llc(01/01/14)

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4420.92

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 43

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Doc Hastings

Full Name (Last, First, Middle Initial)

**A. Print NW**

Mailing Address 9914 32nd Avenue S

City	State	Zip Code
Lakewood	WA	98499-9265

Purpose of Disbursement  
Printed Invites Fundraising

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		22		2013

Amount of Each Disbursement this Period

129.09
--------

Transaction ID : B-S-11

**[MEMO ITEM]**

Subitemization of Anitra Beruti Consulting, Llc(01/01/14)

**B. Anitra Beruti Consulting, Llc**Mailing Address 524 6th Avenue W  
Apt. 106

City	State	Zip Code
Seattle	WA	98119-5901

Purpose of Disbursement  
Consulting Service - Fundraising

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

Amount of Each Disbursement this Period

6040.4
--------

Transaction ID : B-E-41046

Original vendors exceeding reporting threshold itemized as memo transactions.

**c. Anitra Beruti Consulting, Llc**Mailing Address 524 6th Avenue W  
Apt. 106

City	State	Zip Code
Seattle	WA	98119-5901

Purpose of Disbursement  
Consulting Service - Fundraising

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		09		2014

Amount of Each Disbursement this Period

3500
------

Transaction ID : B-E-41047

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

9540.40



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 43

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Doc Hastings

Full Name (Last, First, Middle Initial)

**A. Anitra Beruti Consulting, Llc**Mailing Address 524 6th Avenue W  
Apt. 106City State Zip Code  
Seattle WA 98119-5901Purpose of Disbursement  
Consulting Service - Fundraising

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2014

Amount of Each Disbursement this Period

7000
------

Transaction ID : B-E-41049

**B. Anitra Beruti Consulting, Llc**Mailing Address 524 6th Avenue W  
Apt. 106City State Zip Code  
Seattle WA 98119-5901Purpose of Disbursement  
Consulting Service - Fundraising

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2014

Amount of Each Disbursement this Period

3500
------

Transaction ID : B-E-41050

**c. Aristotle International, Inc.**

Mailing Address 50 E Street SE

City State Zip Code  
Washington DC 20003-2620Purpose of Disbursement  
Software Support

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		07		2014

Amount of Each Disbursement this Period

2250
------

Transaction ID : B-E-41044

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

12750.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 43

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Doc Hastings

Full Name (Last, First, Middle Initial)

**A. Aristotle International, Inc.**

Mailing Address 50 E Street SE

City	State	Zip Code
Washington	DC	20003-2620

Purpose of Disbursement  
Software Support

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		09		2014

Amount of Each Disbursement this Period

2250
------

Transaction ID : B-E-41048

**B. Burden Park Self Storage**

Mailing Address 4902 N Road 60

City	State	Zip Code
Pasco	WA	99301-9136

Purpose of Disbursement  
Storage Rent

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2014

Amount of Each Disbursement this Period

129
-----

Transaction ID : B-E-40988

**c. Burden Park Self Storage**

Mailing Address 4902 N Road 60

City	State	Zip Code
Pasco	WA	99301-9136

Purpose of Disbursement  
Storage Rent

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

Amount of Each Disbursement this Period

129
-----

Transaction ID : B-E-41025

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2508.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 43

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Doc Hastings

Full Name (Last, First, Middle Initial)

**A. Burden Park Self Storage**

Mailing Address 4902 N Road 60

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

City	State	Zip Code
Pasco	WA	99301-9136

Purpose of Disbursement  
Storage Rent

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

129
-----

Transaction ID : B-E-41029

**B. C & P Properties - Pasco**

Mailing Address 2318 W Court Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		07		2014

City	State	Zip Code
Pasco	WA	99301-3939

Purpose of Disbursement  
Office Rent

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

300
-----

Transaction ID : B-E-40983

**c. C & P Properties - Pasco**

Mailing Address 2318 W Court Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

City	State	Zip Code
Pasco	WA	99301-3939

Purpose of Disbursement  
Office Rent

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

300
-----

Transaction ID : B-E-40995

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

729.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 43

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Doc Hastings

Full Name (Last, First, Middle Initial)

**A. C & P Properties - Pasco**

Mailing Address 2318 W Court Street

City	State	Zip Code
Pasco	WA	99301-3939

Purpose of Disbursement  
Office Rent

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

Amount of Each Disbursement this Period

300
-----

Transaction ID : B-E-41028

**B. Clearwire Broadband**

Mailing Address 5601 W Clearwater Avenue

City	State	Zip Code
Kennewick	WA	99336-4953

Purpose of Disbursement  
Internet Service

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		07		2014

Amount of Each Disbursement this Period

35.4
------

Transaction ID : B-E-41059

**c. Clearwire Broadband**

Mailing Address 5601 W Clearwater Avenue

City	State	Zip Code
Kennewick	WA	99336-4953

Purpose of Disbursement  
Internet Service

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		07		2014

Amount of Each Disbursement this Period

35.4
------

Transaction ID : B-E-41060

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

370.80

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 43

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Doc Hastings

Full Name (Last, First, Middle Initial)

**A. Clearwire Broadband**

Mailing Address 5601 W Clearwater Avenue

Date of Disbursement

M M	D D	Y Y Y Y
03	07	2014

City	State	Zip Code
Kennewick	WA	99336-4953

Amount of Each Disbursement this Period

35.4
------

Purpose of Disbursement  
Internet

001

Transaction ID : B-E-41061

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate		
	President		

State: District:

Full Name (Last, First, Middle Initial)

**B. Florentine Design Group, LLC**

Mailing Address PO Box 1675

Date of Disbursement

M M	D D	Y Y Y Y
03	31	2014

City	State	Zip Code
Bothell	WA	98041-1675

Amount of Each Disbursement this Period

263.75
--------

Purpose of Disbursement  
Website Hosting/Support

001

Transaction ID : B-E-41052

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate		
	President		

State: District:

Full Name (Last, First, Middle Initial)

**C. FLS Connect, LLC**Mailing Address 7300 Hudson Boulevard N  
Suite 270

Date of Disbursement

M M	D D	Y Y Y Y
02	03	2014

City	State	Zip Code
Saint Paul	MN	55128-7143

Amount of Each Disbursement this Period

80
----

Purpose of Disbursement  
Fundraising - Print/Mail

003

Transaction ID : B-E-40993

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate		
	President		

State: District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

379.15

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 43

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Doc Hastings

Full Name (Last, First, Middle Initial)

**A. Frontier Communications**

Mailing Address PO Box 20550

City	State	Zip Code
Rochester	NY	14602-0550

Purpose of Disbursement  
Phone Service

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		08		2014

Amount of Each Disbursement this Period

175.75
--------

Transaction ID : B-E-40986

**B. Frontier Communications**

Mailing Address PO Box 20550

City	State	Zip Code
Rochester	NY	14602-0550

Purpose of Disbursement  
Phone Service

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

Amount of Each Disbursement this Period

176.3
-------

Transaction ID : B-E-40994

**C. Frontier Communications**

Mailing Address PO Box 20550

City	State	Zip Code
Rochester	NY	14602-0550

Purpose of Disbursement  
Phone Service

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

Amount of Each Disbursement this Period

176.3
-------

Transaction ID : B-E-41030

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

528.35

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 43

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Doc Hastings

Full Name (Last, First, Middle Initial)

**A. Grebb, Johnson, Reed & Wachsmith, LLP - Ellensburg**

Mailing Address PO Box 460

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

City	State	Zip Code
Ellensburg	WA	98926-1915

Purpose of Disbursement  
Accounting Services

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

265
-----

Transaction ID : B-E-41031

**B. Peter Godlewski**

Mailing Address 117 N 4th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2014

City	State	Zip Code
Yakima	WA	98901-2706

Purpose of Disbursement  
Reimbursement - Lincoln Day Dinner

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

60
----

Transaction ID : B-E-41053

**c. Peter Godlewski**

Mailing Address 117 N 4th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2014

City	State	Zip Code
Yakima	WA	98901-2706

Purpose of Disbursement  
Travel reimbursement

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

131.46
--------

Transaction ID : B-E-41054

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

456.46

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 43

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Doc Hastings

Full Name (Last, First, Middle Initial)

**A. Sara Schwan**

Mailing Address 6926 W 20th Avenue

City	State	Zip Code
Kennewick	WA	99338-1514

Purpose of Disbursement  
Wages

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		07		2014

Amount of Each Disbursement this Period

258.58
--------

Transaction ID : B-E-40982

**B. Sara Schwan**

Mailing Address 6926 W 20th Avenue

City	State	Zip Code
Kennewick	WA	99338-1514

Purpose of Disbursement  
Reimbursement - Mail Chimp

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		08		2014

Amount of Each Disbursement this Period

50
----

Transaction ID : B-E-40985

**c. Sara Schwan**

Mailing Address 6926 W 20th Avenue

City	State	Zip Code
Kennewick	WA	99338-1514

Purpose of Disbursement  
Wages

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2014

Amount of Each Disbursement this Period

267.82
--------

Transaction ID : B-E-40989

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

576.40



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 43

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Doc Hastings**

Full Name (Last, First, Middle Initial)

**A. Sara Schwan**

Mailing Address 6926 W 20th Avenue

City	State	Zip Code
Kennewick	WA	99338-1514

Purpose of Disbursement  
Wages

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		19		2014

Amount of Each Disbursement this Period

184.7

Transaction ID : B-E-41026

**B. Sara Schwan**

Mailing Address 6926 W 20th Avenue

City	State	Zip Code
Kennewick	WA	99338-1514

Purpose of Disbursement  
Wages

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		19		2014

Amount of Each Disbursement this Period

92.35

Transaction ID : B-E-41027

**c. Sara Schwan**

Mailing Address 6926 W 20th Avenue

City	State	Zip Code
Kennewick	WA	99338-1514

Purpose of Disbursement  
Wages

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

Amount of Each Disbursement this Period

193.94

Transaction ID : B-E-41023

**SUBTOTAL** of Disbursements This Page (optional).....

470.99

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 43

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Doc Hastings**

Full Name (Last, First, Middle Initial)

**A. Sara Schwan**

Mailing Address 6926 W 20th Avenue

City	State	Zip Code
Kennewick	WA	99338-1514

Purpose of Disbursement  
Reimbursement - Mail Chimp

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

Amount of Each Disbursement this Period

50
----

Transaction ID : B-E-41024

**B. Steve Brown Direct Marketing, LLC**

Mailing Address 10045 Whitetail Lane

City	State	Zip Code
Truckee	CA	96161-2704

Purpose of Disbursement  
Fundraising - Print/Mail

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		07		2014

Amount of Each Disbursement this Period

5873.18
---------

Transaction ID : B-E-41043

**c. Storm On Demand/Liquid Web**

Mailing Address 4210 S Creyts Road

City	State	Zip Code
Lansing	MI	48917-9526

Purpose of Disbursement  
Website Hosting/Support

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		07		2014

Amount of Each Disbursement this Period

58.64
-------

Transaction ID : B-E-40984

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5981.82

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 43

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Doc Hastings

Full Name (Last, First, Middle Initial)

**A. Storm On Demand/Liquid Web**

Mailing Address 4210 S Creyts Road

City	State	Zip Code
Lansing	MI	48917-9526

Purpose of Disbursement  
Website Hosting/Support

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

Amount of Each Disbursement this Period

58.95
-------

Transaction ID : B-E-40992

**B. Storm On Demand/Liquid Web**

Mailing Address 4210 S Creyts Road

City	State	Zip Code
Lansing	MI	48917-9526

Purpose of Disbursement  
Website Hosting/Support

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2014

Amount of Each Disbursement this Period

112.45
--------

Transaction ID : B-E-41034

**c. The Roanoke Conference**Mailing Address 6947 Coal Creek Parkway SE  
# 139

City	State	Zip Code
Newcastle	WA	98059-3136

Purpose of Disbursement  
Sponsorship

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		15		2014

Amount of Each Disbursement this Period

500
-----

Transaction ID : B-E-41039

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

671.40

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 28 OF 43

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Doc Hastings**

Full Name (Last, First, Middle Initial)

**A. Timothy Kovis**Mailing Address 350 G Street SW  
Apt. N118

City Washington State DC Zip Code 20024-3160

Purpose of Disbursement  
Travel reimbursement

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	25	2014

Amount of Each Disbursement this Period

140
-----

Transaction ID : B-E-41038

**B. Todd Young**

Mailing Address 11076 Thrush Ridge Road

City Reston State VA Zip Code 20191-4721

Purpose of Disbursement  
Reimbursement - Travel Expenses

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	28	2014

Amount of Each Disbursement this Period

735.47
--------

Transaction ID : B-E-41055

**c. US Treasury**

Mailing Address 1500 Pennsylvania Avenue NW

City Washington State DC Zip Code 20220-0001

Purpose of Disbursement  
Taxes

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
01	21	2014

Amount of Each Disbursement this Period

82.6
------

Transaction ID : B-E-41069

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

958.07

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 43

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Doc Hastings

Full Name (Last, First, Middle Initial)

**A. US Treasury**

Mailing Address 1500 Pennsylvania Avenue NW

City	State	Zip Code
Washington	DC	20220-0001

Purpose of Disbursement  
Taxes

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2014

Amount of Each Disbursement this Period

40.44
-------

Transaction ID : B-E-41070

**B. USPS**

Mailing Address 3500 W Court Street

City	State	Zip Code
Pasco	WA	99301-9997

Purpose of Disbursement  
Postage - Office Use

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		10		2014

Amount of Each Disbursement this Period

400
-----

Transaction ID : B-E-41051

**c. USPS**

Mailing Address 3500 W Court Street

City	State	Zip Code
Pasco	WA	99301-9997

Purpose of Disbursement  
Postage - Office Use

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		24		2014

Amount of Each Disbursement this Period

2300
------

Transaction ID : B-E-41045

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2740.44

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 30 OF 43

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Doc Hastings

Full Name (Last, First, Middle Initial)

**A. Yakima Federal Savings and Loan - Kennewick**

Mailing Address 3350 W Clearwater Avenue

City	State	Zip Code
Kennewick	WA	99336-2733

Purpose of Disbursement  
Processing Fees

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		02		2014

Amount of Each Disbursement this Period

508.82
--------

Transaction ID : B-E-41062

**B. Yakima Federal Savings and Loan - Kennewick**

Mailing Address 3350 W Clearwater Avenue

City	State	Zip Code
Kennewick	WA	99336-2733

Purpose of Disbursement  
Processing Fees

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		08		2014

Amount of Each Disbursement this Period

28.95
-------

Transaction ID : B-E-41065

**C. Yakima Federal Savings and Loan - Kennewick**

Mailing Address 3350 W Clearwater Avenue

City	State	Zip Code
Kennewick	WA	99336-2733

Purpose of Disbursement  
Processing Fees

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

Amount of Each Disbursement this Period

88.97
-------

Transaction ID : B-E-41063

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

626.74

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 43

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Doc Hastings

Full Name (Last, First, Middle Initial)

**A. Yakima Federal Savings and Loan - Kennewick**

Mailing Address 3350 W Clearwater Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		07		2014

City	State	Zip Code
Kennewick	WA	99336-2733

Amount of Each Disbursement this Period

25.45
-------

Purpose of Disbursement  
Processing Fees

001

Transaction ID : B-E-41066

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**B. Yakima Federal Savings and Loan - Kennewick**

Mailing Address 3350 W Clearwater Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		21		2014

City	State	Zip Code
Kennewick	WA	99336-2733

Amount of Each Disbursement this Period

79.95
-------

Purpose of Disbursement  
Processing Fees

001

Transaction ID : B-E-41068

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**C. Yakima Federal Savings and Loan - Kennewick**

Mailing Address 3350 W Clearwater Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2014

City	State	Zip Code
Kennewick	WA	99336-2733

Amount of Each Disbursement this Period

27.14
-------

Purpose of Disbursement  
Processing Fees

001

Transaction ID : B-E-41064

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

132.54

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 32 OF 43

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Doc Hastings

Full Name (Last, First, Middle Initial)

**A. Yakima Federal Savings and Loan - Kennewick**

Mailing Address 3350 W Clearwater Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		07		2014

City	State	Zip Code
Kennewick	WA	99336-2733

Amount of Each Disbursement this Period

25.15
-------

Purpose of Disbursement  
Processing Fees

001

Transaction ID : B-E-41067

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

25.15

43866.63



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 33 OF 43

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Doc Hastings**

Full Name (Last, First, Middle Initial)

**A. Ken Alterman**

Mailing Address 8117 SE 74th Place

City	State	Zip Code
Mercer Island	WA	98040-5935

Purpose of Disbursement  
Refund of contribution

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

Amount of Each Disbursement this Period

250
-----

Transaction ID : B-E-41007

**B. Helen Behar**

Mailing Address 6030 52nd Avenue S

City	State	Zip Code
Seattle	WA	98118-2908

Purpose of Disbursement  
Refund of contribution

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

Amount of Each Disbursement this Period

500
-----

Transaction ID : B-E-41003

**C. Zane Brown Jr.**

Mailing Address 4402 94th Avenue NE

City	State	Zip Code
Bellevue	WA	98004-1314

Purpose of Disbursement  
Refund of contribution

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

Amount of Each Disbursement this Period

250
-----

Transaction ID : B-E-41006

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1000.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 34 OF 43

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Doc Hastings**

Full Name (Last, First, Middle Initial)

**A. Janet Cheetham**

Mailing Address 6705 SE 30th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

City	State	Zip Code
Mercer Island	WA	98040-2521

Purpose of Disbursement  
Refund of contribution

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

250
-----

Transaction ID : B-E-41011

**B. William Donner**

Mailing Address 2768 68th Avenue SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

City	State	Zip Code
Mercer Island	WA	98040-2529

Purpose of Disbursement  
Refund of contribution

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

1000
------

Transaction ID : B-E-41022

**c. Charles E Evans**

Mailing Address 355 Westmoreland Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

City	State	Zip Code
Richland	WA	99354-1954

Purpose of Disbursement  
Refund of contribution

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

50
----

Transaction ID : B-E-41021

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1300.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 35 OF 43

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Doc Hastings**

Full Name (Last, First, Middle Initial)

**A. John Friedlander**Mailing Address 801 NW 42nd Street  
Suite 214City State Zip Code  
Seattle WA 98107-4503Purpose of Disbursement  
Refund of contribution

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

Amount of Each Disbursement this Period

100
-----

Transaction ID : B-E-41012

**B. Erica O. Garrie**

Mailing Address 113 Cedar Crest Lane

City State Zip Code  
Bellevue WA 98004-6725Purpose of Disbursement  
Refund of contribution

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

Amount of Each Disbursement this Period

250
-----

Transaction ID : B-E-41013

**c. Brett Goldfarb**

Mailing Address PO Box 1380

City State Zip Code  
Mercer Island WA 98040-1380Purpose of Disbursement  
Refund of Contribution

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

Amount of Each Disbursement this Period

750
-----

Transaction ID : B-E-40998

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1100.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 36 OF 43

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Doc Hastings**

Full Name (Last, First, Middle Initial)

**A. Richard Gumpert**

Mailing Address 10933 84th Place NE

City	State	Zip Code
Kirkland	WA	98034-3539

Purpose of Disbursement  
Refund of contribution

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

Amount of Each Disbursement this Period

500
-----

Transaction ID : B-E-41005

**B. Carolyn Hathaway**

Mailing Address 8828 NE 34th Street

City	State	Zip Code
Yarrow Point	WA	98004-1235

Purpose of Disbursement  
Refund of contribution

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

Amount of Each Disbursement this Period

250
-----

Transaction ID : B-E-41008

**c. Barry M. Kaplan**

Mailing Address 2122 E Hamlin Street

City	State	Zip Code
Seattle	WA	98112-2012

Purpose of Disbursement  
Refund of contribution

010

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

Amount of Each Disbursement this Period

500
-----

Transaction ID : B-E-41009

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1250.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 37 OF 43

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Doc Hastings**

Full Name (Last, First, Middle Initial)

**A. Stephen B. Loeb**

Mailing Address 1917 Sunset Avenue SW

City	State	Zip Code
Seattle	WA	98116-1949

Purpose of Disbursement  
Refund of contribution

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

Amount of Each Disbursement this Period

250
-----

Transaction ID : B-E-41010

**B. Frederick W. McDonald**

Mailing Address 416 S 56th Avenue

City	State	Zip Code
Yakima	WA	98908-3425

Purpose of Disbursement  
Refund of Contribution

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

Amount of Each Disbursement this Period

1000
------

Transaction ID : B-E-40997

**c. Shimon Mizrahi**

Mailing Address 21806 SE 28th Street

City	State	Zip Code
Sammamish	WA	98075-7123

Purpose of Disbursement  
Refund of contribution

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

Amount of Each Disbursement this Period

250
-----

Transaction ID : B-E-41014

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 38 OF 43

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Doc Hastings

Full Name (Last, First, Middle Initial)

**A. Jessie N. Overman**

Mailing Address 8217 Road N.5 NW

City	State	Zip Code
Quincy	WA	98848-9799

Purpose of Disbursement  
Refund of contribution

010

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

Amount of Each Disbursement this Period

50
----

Transaction ID : B-E-41001

**B. Charles Rhoden**

Mailing Address 525 Rhodora Heights Road

City	State	Zip Code
Lake Stevens	WA	98258-9721

Purpose of Disbursement  
Refund of contribution

010

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

Amount of Each Disbursement this Period

50
----

Transaction ID : B-E-41000

**C. Michael Sandorffy**Mailing Address 520 Pike Street  
Suite 1500

City	State	Zip Code
Seattle	WA	98101-4044

Purpose of Disbursement  
Refund of contribution

010

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

Amount of Each Disbursement this Period

1000
------

Transaction ID : B-E-40999

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1100.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 39 OF 43

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Doc Hastings**

Full Name (Last, First, Middle Initial)

**A. Herman Sarkowsky**Mailing Address 1201 3rd Avenue  
Suite 5450City State Zip Code  
Seattle WA 98101-3018Purpose of Disbursement  
Refund of contribution

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

Amount of Each Disbursement this Period

500
-----

Transaction ID : B-E-41015

**B. Gabriel Scherzer**

Mailing Address 3401 Evergreen Point Road

City State Zip Code  
Medina WA 98039-1022Purpose of Disbursement  
Refund of contribution

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

Amount of Each Disbursement this Period

250
-----

Transaction ID : B-E-41019

**C. Michael Schuffler**

Mailing Address 8400 SE 61st Street

City State Zip Code  
Mercer Island WA 98040-4912Purpose of Disbursement  
Refund of contribution

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

Amount of Each Disbursement this Period

150
-----

Transaction ID : B-E-41016

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

900.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 40 OF 43

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Doc Hastings**

Full Name (Last, First, Middle Initial)

**A. Benjamin Shoval**Mailing Address 123 E Yakima Avenue  
# 210City State Zip Code  
Yakima WA 98901-2625Purpose of Disbursement  
Refund of contribution

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	25	2014

Amount of Each Disbursement this Period

500
-----

Transaction ID : B-E-41017

**B. Fredric Tobis**

Mailing Address 7411 SE 36th Street

City State Zip Code  
Mercer Island WA 98040-3412Purpose of Disbursement  
Refund of contribution

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	25	2014

Amount of Each Disbursement this Period

500
-----

Transaction ID : B-E-41004

**c. Karen Treiger**

Mailing Address 5533 S Holly Street

City State Zip Code  
Seattle WA 98118-3450Purpose of Disbursement  
Refund of contribution

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	25	2014

Amount of Each Disbursement this Period

200
-----

Transaction ID : B-E-41018

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1200.00





**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 42 OF 43

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Doc Hastings**

Full Name (Last, First, Middle Initial)

**A. Franklin Co Republican Committee**

Mailing Address PO Box 3305

Date of Disbursement

M M	D D	Y Y Y Y
03	20	2014

City	State	Zip Code
Pasco	WA	99302-3305

Amount of Each Disbursement this Period

130
-----

Purpose of Disbursement  
Contribution - Lincoln Day Dinner

012

**Transaction ID : B-E-41032**

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate		
	President		

State: District:

Full Name (Last, First, Middle Initial)

**B. Friends Of David Jolly**

Mailing Address PO Box 1158

Date of Disbursement

M M	D D	Y Y Y Y
02	18	2014

City	State	Zip Code
Indian Rocks Beach	FL	33785-1158

Amount of Each Disbursement this Period

2000
------

Purpose of Disbursement  
Political Contribution

011

**Transaction ID : B-E-41037**

Candidate Name

**David Jolly**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House	Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate		
	President		

State: District: 13

Full Name (Last, First, Middle Initial)

**c. Lobiondo For Congress**

Mailing Address PO Box 550

Date of Disbursement

M M	D D	Y Y Y Y
03	18	2014

City	State	Zip Code
Vineland	NJ	08362-0550

Amount of Each Disbursement this Period

1000
------

Purpose of Disbursement  
Political Contribution

011

**Transaction ID : B-E-41040**

Candidate Name

**Frank A. Lobiondo**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House	Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate		
	President		

State: NJ District: 02

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3130.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 43 OF 43

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Doc Hastings**

Full Name (Last, First, Middle Initial)

**A. NRCC**

Mailing Address 320 1st Street SE

Date of Disbursement

M M	D D	Y Y Y Y
03	26	2014

City	State	Zip Code
Washington	DC	20003-1838

Purpose of Disbursement  
Political Contribution

012

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Amount of Each Disbursement this Period

108000
--------

Transaction ID : B-E-41035

**B. Pedro For Congress**

Mailing Address PO Box 2854

Date of Disbursement

M M	D D	Y Y Y Y
03	26	2014

City	State	Zip Code
Redmond	WA	98073-2854

Purpose of Disbursement  
Political Contribution

011

Candidate Name

**Pedro R Pierluisi**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	2014	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)	

State: PR District:

Amount of Each Disbursement this Period

1000
------

Transaction ID : B-E-41036

**c. Simpson For Congress**

Mailing Address 1487 Parkway Drive

Date of Disbursement

M M	D D	Y Y Y Y
03	12	2014

City	State	Zip Code
Blackfoot	ID	83221-1667

Purpose of Disbursement  
Political Contribution

011

Candidate Name

**Michael K Simpson**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	2014	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)	

State: ID District: 02

Amount of Each Disbursement this Period

2000
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Transaction ID : B-E-41041

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

111000.00

114130.00